

ILLINOIS DEPARTMENT OF INSURANCE

SUMMARY SHEET

Change in Company's premium or rate level produced by rate revision effective MAY 1, 2007 ~~2006~~

(1) <u>Coverage</u>	(2) <u>Annual Premium Volume (Illinois)*</u>	(3) <u>Percent Change (+ or -)**</u>
1. Automobile Liability Private		
Passenger Commercial		
2. Automobile Physical Damage		
Private Passenger Commercial		
3. Liability Other Than Auto		
4. Burglary and Theft		
5. Glass		
6. Fidelity		
7. Surety		
8. Boiler and Machinery		
9. Fire		
10. Extended Coverage		
11. Inland Marine		
12. Homeowners		
13. Commercial Multi-Peril		
14. Crop Hail		
15. Other <u>Workers Compensation</u>	1,950,000	30000 4.6
Line of Insurance		

Does filing only apply to certain territory (territories) or certain classes? If so, specify: This filing applies to all classes, although the resulting impact is not uniform by classes.

Brief description of filing. (If filing follows rates of an advisory organization, specify organization): Adopt the NCCI loss costs referenced in NCCI Approval Circular IL-06-11 and adjust loss cost multipliers.

*Adjusted to reflect all prior rate changes.

**Change in Company's premium level which will result from application of new rates.

Accident Fund General Insurance Company

Name of Company

Jane Chorley, Compliance Advisor

Official - _____

RECEIVED

MAR - 2 2007

IDFPR (MPC)

DIVISION OF INSURANCE
SPRINGFIELD

DIVISION OF INSURANCE
STATE OF ILLINOIS/IDFPR
FILED

MAY 01 2007

SPRINGFIELD, ILLINOIS

ILLINOIS DEPARTMENT OF INSURANCE

SUMMARY SHEET

Change in Company's premium or rate level produced by rate revision effective May 1, 2007 4.6%

(1) Coverage	(2) Annual Premium Volume (Illinois)*	(3) Percent Change (+ or -)**
1. Automobile Liability Private Passenger Commercial		
2. Automobile Physical Damage Private Passenger Commercial		
3. Liability Other Than Auto		
4. Burglary and Theft		
5. Glass		
6. Fidelity		
7. Surety		
8. Boiler and Machinery		
9. Fire		
10. Extended Coverage		
11. Inland Marine		
12. Homeowners		
13. Commercial Multi-Peril		
14. Crop Hail		
15. Other <u>Workers Compensation</u> Line of Insurance	51,700,000	2,400,000 4.6

Does filing only apply to certain territory (territories) or certain classes? If so, specify: This filing applies to all classes, although the resulting impact is not uniform by class.

Brief description of filing. (If filing follows rates of an advisory organization, specify organization): Adopt the NCCI loss costs referenced in NCCI Approval Circular IL-06-11 and adjust loss cost multipliers.

*Adjusted to reflect all prior rate changes.

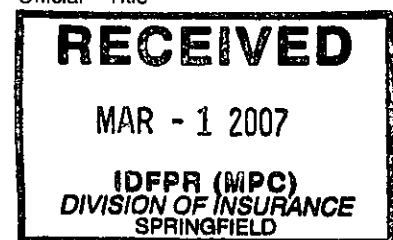
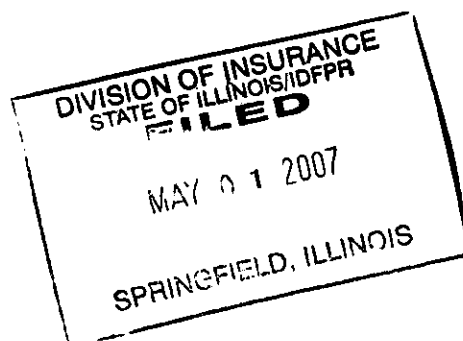
**Change in Company's premium level which will result from application of new rates.

Accident Fund Insurance Company of America

Name of Company

Jane Chorley, Compliance Advisor

Official - Title

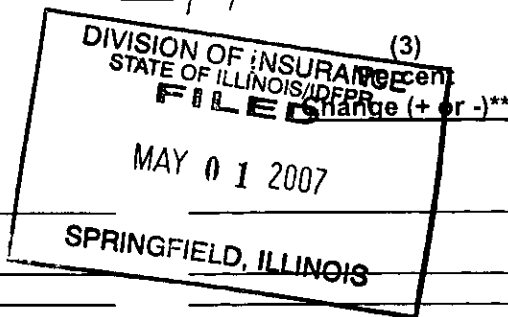


ILLINOIS DEPARTMENT OF INSURANCE

SUMMARY SHEET

 Change in Company's premium or rate level produced by rate revision effective MAY 1, 2007 4.6%

(1) Coverage	(2) Annual Premium Volume (Illinois)*	(3) Percent Change (+ or -)**
1. Automobile Liability Private		
Passenger Commercial		
2. Automobile Physical Damage		
Private Passenger Commercial		
3. Liability Other Than Auto		
4. Burglary and Theft		
5. Glass		
6. Fidelity		
7. Surety		
8. Boiler and Machinery		
9. Fire		
10. Extended Coverage		
11. Inland Marine		
12. Homeowners		
13. Commercial Multi-Peril		
14. Crop Hail		
15. Other <u>Workers Compensation</u>	570,000	-20.00 <u>4.6</u>
Line of Insurance		



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Brief description of filing. (If filing follows rates of an advisory organization, specify organization): Adopt the NCCI loss costs referenced in Approval Circular IL-06-11 and adjust loss cost multipliers.

*Adjusted to reflect all prior rate changes.

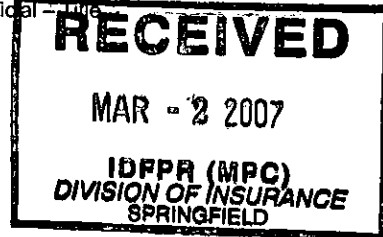
**Change in Company's premium level which will result from application of new rates.

Accident Fund National Insurance Company

Name of Company

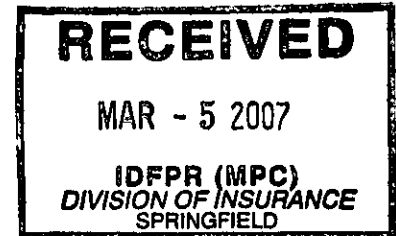
Jane Chorley, Compliance Advisor

Official - Title



Form (RF-3)

SUMMARY SHEET



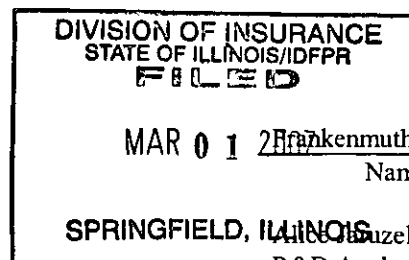
Change in Company's premium or rate level produced by rate revision effective 3/1/07

(1) Coverage	(2) Annual Premium Volume (Illinois)*	(3) Percent Change (+ or -)**
1. Automobile Liability		
Private Passenger		
Commercial		
2. Automobile Physical Damage		
Private Passenger		
Commercial		
3. Liability Other Than Auto		
4. Burglary and Theft		
5. Glass		
6. Fidelity		
7. Surety		
8. Boiler and Machinery		
9. Fire		
10. Extended Coverage		
11. Inland Marine		
12. Homeowners		
13. Commercial Multi-Peril		
14. Crop Hail		
15. Other Workers'	\$14,016,838	0.69%
Compensation		
Line of Insurance		

Does filing only apply to certain territory (territories) or certain classes? If so, specify:
N/A

Brief description of filing. (If filing follows rates of an advisory organization, specify organization):
Filing revised rates, minimum premiums and miscellaneous values

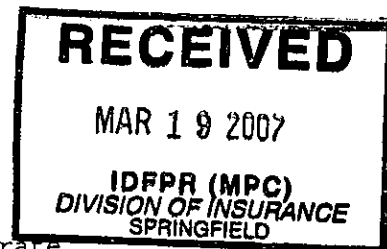
- * Adjusted to reflect all prior rate changes.
- ** Change in Company's premium level which will result from application of new rates.



Frankenmuth Mutual Insurance Company
Name of Company

Michael J. Huzel
R&D Analyst II

Official - Title



Form (RF-3)

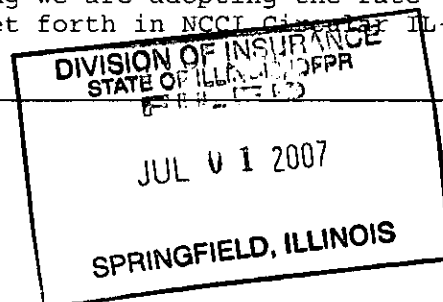
SUMMARY SHEET

Change in Company's premium or rate level produced by rate
revision effective 07/01/2007

(1) Coverage	(2) Annual Premium Volume (Illinois)*	(3) Percent Change (+ or -)**
1. Automobile Liability Private Passenger Commercial		
2. Automobile Physical Damage Private Passenger Commercial		
3. Liability Other Than Auto		
4. Burglary and Theft		
5. Glass		
6. Fidelity		
7. Surety		
8. Boiler and Machinery		
9. Fire		
10. Extended Coverage		
11. Inland Marine		
12. Homeowners		
13. Commercial Multi-Peril		
14. Crop Hail		
15. Other <u>Workers Compensation</u>	<u>577,086</u>	<u>2.2%</u>
<u>Line of Insurance</u>		

Does filing only apply to certain territory (territories) or certain classes?
If so, specify: _____

Brief description of filing. (If filing follows rates of an advisory organization, specify organization): With this filing we are adopting the rate revisions as set forth in NCCI Circular IL-2006-11.



- * Adjusted to reflect all prior rate changes.
** Change in Company's premium level which will result from application of new rates.

Graphic Arts Mutual Insurance Company
Name of Company

George T. Dodd, Vice President and Actuary
Official - Title

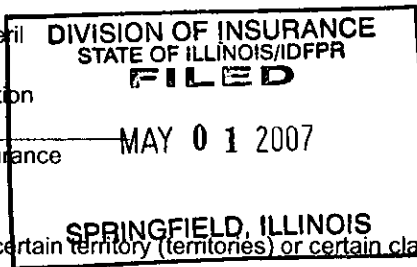
ILLINOIS SUMMARY SHEET

FORM RF-3

Change in Company's premium or rate level produced by rate revision effective

May 1, 2007

(1) Coverage	(2) Annual Premium Volume (Illinois)*	(3) Percent Change (+ or -)**
1. Automobile Liability		
Private Passenger		
Commercial		
2. Automobile Physical Damage		
Private Passenger		
Commercial		
3. Liability Other than Auto		
4. Burglary and Theft		
5. Glass		
6. Fidelity		
7. Surety		
8. Boiler and Machinery		
9. Fire		
10. Extended Coverage		
11. Inland Marine		
12. Homeowners		
13. Commercial Multi-Peril		
14. Crop Hail		
15. Workers Compensation	829,957	+2.0%
16. Other		
Line of Insurance		



Does filing only apply to certain territory (territories) or certain classes? If so, specify

No

Brief description of filing (if filing follows rates of an advisory organization, specify organization)

At this time, the Manufacturers Alliance Insurance Company (NAIC #36897) files to adopt the loss costs approved in NCCI's filing #IL-2006-11 for use against our approved 1.920 LCM.

* Adjusted to reflect all prior rate changes.

** Change in Company's premium level which will result from application of new rates.

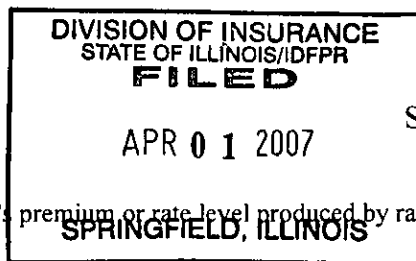
**Manufacturers Alliance Insurance
Company**

Name of Company

Linda R. Greer- WC Product Analyst

Official — Title

Form (RF-3)



SUMMARY SHEET

Change in Company's premium or rate level produced by rate revision effective April 1, 2007

(1) Coverage	(2) Annual Premium Volume (Illinois)*	(3) Percent Change (+ or -)**
1. Automobile Liability		
Private Passenger		
Commercial		
2. Automobile Physical Damage		
Private Passenger		
Commercial		
3. Liability Other Than Auto		
4. Burglary and Theft		
5. Glass		
6. Fidelity		
7. Surety		
8. Boiler and Machinery		
9. Fire		
10. Extended Coverage		
11. Inland Marine		
12. Homeowners		
13. Commercial Multi-Peril		
14. Crop Hail		
15. Other <u>Workers' Comp</u>	<u>1,336,185</u>	<u>1.8%</u>
Line of Insurance		

Does filing only apply to certain territory (territories) or certain classes? If so, specify:

Brief description of filing. (If filing follows rates of an advisory organization, specify organization):

Adoption of NCCI Voluntary Market Advisory Loss Costs and Rating Values along with
revision of Company Loss Cost Multiplier, effective April 1, 2007.

- * Adjusted to reflect all prior rate changes.
** Change in Company's premium level which will result from application of new rates.

Mitsui Sumitomo Insurance
Company of America
Name of Company

Scott M. Herbert, Senior
Government Affairs Analyst
Official - Title

Change in Company's premium or rate level produced by rate revision effective April 1, 2007

(1) Coverage	(2) Annual Premium Volume (Illinois)*	(3) Percent Change (+ or -)**
1. Automobile Liability		
Private Passenger		
Commercial		
2. Automobile Physical Damage		
Private Passenger		
Commercial		
3. Liability Other Than Auto		
4. Burglary and Theft		
5. Glass		
6. Fidelity		
7. Surety		
8. Boiler and Machinery		
9. Fire		
10. Extended Coverage		
11. Inland Marine		
12. Homeowners		
13. Commercial Multi-Peril		
14. Crop Hail		
15. Other <u>Workers' Comp</u>	<u>2,915,086</u>	<u>-4.3%</u>
Line of Insurance		

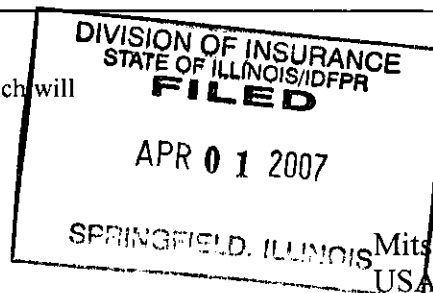
Does filing only apply to certain territory (territories) or certain classes? If so, specify:

Brief description of filing. (If filing follows rates of an advisory organization, specify organization):

Adoption of NCCI Voluntary Market Advisory Loss Costs and Rating Values along with
revision of Company Loss Cost Multiplier, effective April 1, 2007.

* Adjusted to reflect all prior rate changes.

** Change in Company's premium level which will result from application of new rates.

Mitsui Sumitomo Insurance
USA Inc.

Name of Company

Scott M. Herbert, Senior
 Government Affairs Analyst
 Official - Title

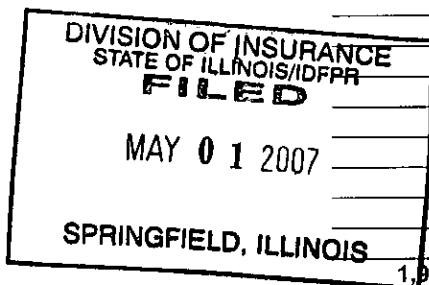
ILLINOIS SUMMARY SHEET

FORM RF-3

Change in Company's premium or rate level produced by rate revision effective

May 1, 2007.

(1) Coverage	(2) Annual Premium Volume (Illinois)*	(3) Percent Change (+ or -)**
1. Automobile Liability		
Private Passenger		
Commercial		
2. Automobile Physical Damage		
Private Passenger		
Commercial		
3. Liability Other than Auto		
4. Burglary and Theft		
5. Glass		
6. Fidelity		
7. Surety		
8. Boiler and Machinery		
9. Fire		
10. Extended Coverage		
11. Inland Marine		
12. Homeowners		
13. Commercial Multi-Peril		
14. Crop Hail		
15. Workers Compensation		
16. Other		
Line of Insurance	1,921,050	+2.0%



Does filing only apply to certain territory (territories) or certain classes? If so, specify

No

Brief description of filing (if filing follows rates of an advisory organization, specify organization)

At this time, the Pennsylvania Manufacturers' Association Insurance Company (NAIC #12262) files to adopt the loss costs approved in NCCI's filing #IL-2006-11 for use against our approved 1.540 LCM.

* Adjusted to reflect all prior rate changes.

** Change in Company's premium level which will result from application of new rates.

**Pennsylvania Manufacturers'
Association Insurance Company**

Name of Company

Linda R. Greer- WC Product Analyst

Official — Title

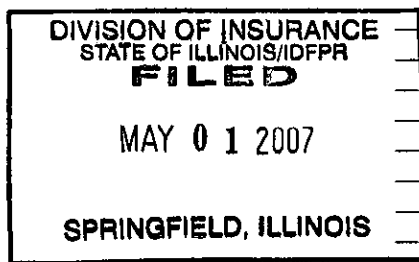
ILLINOIS SUMMARY SHEET

FORM RF-3

Change in Company's premium or rate level produced by rate revision effective

May 1, 2007

(1) Coverage	(2) Annual Premium Volume (Illinois)*	(3) Percent Change (+ or -)**
1. Automobile Liability		
Private Passenger		
Commercial		
2. Automobile Physical Damage		
Private Passenger		
Commercial		
3. Liability Other than Auto		
4. Burglary and Theft		
5. Glass		
6. Fidelity		
7. Surety		
8. Boiler and Machinery		
9. Fire		
10. Extended Coverage		
11. Inland Marine		
12. Homeowners		
13. Commercial Multi-Peril		
14. Crop Hail		
15. Workers Compensation	51,262	+2.0%
16. Other _____		
Line of Insurance		



Does filing only apply to certain territory (territories) or certain classes? If so, specify

No

Brief description of filing (if filing follows rates of an advisory organization, specify organization)

At this time, the Pennsylvania Manufacturers Indemnity Company (NAIC #41424) files to adopt the loss costs approved in NCCI's filing #IL-2006-11 for use against our approved 1.250 LCM.

* Adjusted to reflect all prior rate changes.

** Change in Company's premium level which will result from application of new rates.

Pennsylvania Manufacturers Indemnity Company

Name of Company

Linda R. Greer- WC Product Analyst

Official — Title

Form (RF-3)

SUMMARY SHEET



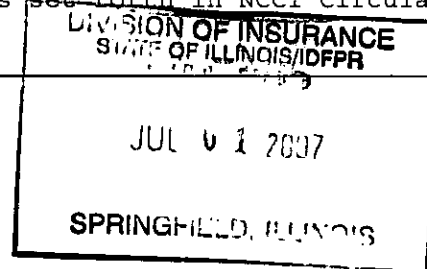
Change in Company's premium or rate level produced by rate
revision effective 07/01/2007

(1) Coverage	(2) Annual Premium Volume (Illinois)*	(3) Percent Change (+ or -)**
1. Automobile Liability		
Private Passenger		
Commercial		
2. Automobile Physical Damage		
Private Passenger		
Commercial		
3. Liability Other Than Auto		
4. Burglary and Theft		
5. Glass		
6. Fidelity		
7. Surety		
8. Boiler and Machinery		
9. Fire		
10. Extended Coverage		
11. Inland Marine		
12. Homeowners		
13. Commercial Multi-Peril		
14. Crop Hail		
15. Other <u>Workers Compensation</u>	<u>50,068</u>	<u>-4.5%</u>
<u>Line of Insurance</u>		

Does filing only apply to certain territory (territories) or certain classes?
If so, specify: _____

Brief description of filing. (If filing follows rates of an advisory organization, specify organization): With this filing we are adopting the rate revisions as set forth in NCCI Circular IL-2006-11.

- * Adjusted to reflect all prior rate changes.
** Change in Company's premium level which will result from application of new rates.



Republic-Franklin Insurance Company
Name of Company

George T. Dodd, Vice President and Actuary
Official - Title

ILLINOIS DEPARTMENT OF INSURANCE

SUMMARY SHEET

Change in Company's premium or rate level produced by rate revision effective May 1, 2007 98%

(1) <u>Coverage</u>	(2) <u>Annual Premium Volume (Illinois)*</u>	(3) <u>Percent Change (+ or -)**</u>
1. Automobile Liability Private		
Passenger Commercial		
2. Automobile Physical Damage		
Private Passenger Commercial		
3. Liability Other Than Auto		
4. Burglary and Theft		
5. Glass		
6. Fidelity		
7. Surety		
8. Boiler and Machinery		
9. Fire		
10. Extended Coverage		
11. Inland Marine		
12. Homeowners		
13. Commercial Multi-Peril		
14. Crop Hail		
15. Other <u>Workers Compensation</u>	40,200,000	240,000 <u>0.6</u>
Line of Insurance		

Does filing only apply to certain territory (territories) or certain classes? If so, specify: This filing applies to all classes, although the resulting impact is not uniform by classes.

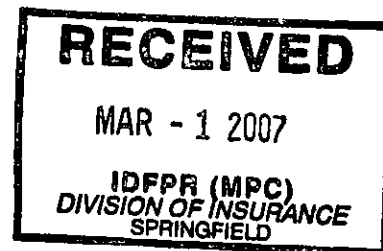
Brief description of filing. (If filing follows rates of an advisory organization, specify organization): Adopt the NCCI loss costs referenced in NCCI approval circular IL-06-11 and file loss cost multiplier. Formerly used voluntary rates.

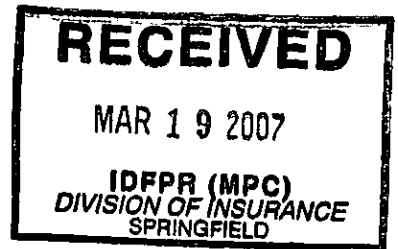
*Adjusted to reflect all prior rate changes.

**Change in Company's premium level which will result from application of new rates.

United Wisconsin Insurance Company
Name of Company

Jane Chorley, Compliance Advisor
Official - Title





Form (RF-3)

SUMMARY SHEET

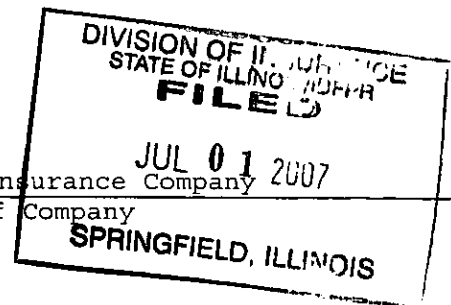
Change in Company's premium or rate level produced by rate
revision effective 07/01/2007

(1) <u>Coverage</u>	(2) <u>Annual Premium Volume (Illinois)*</u>	(3) <u>Percent Change (+ or -)**</u>
1. Automobile Liability		
Private Passenger		
Commercial		
2. Automobile Physical Damage		
Private Passenger		
Commercial		
3. Liability Other Than Auto		
4. Burglary and Theft		
5. Glass		
6. Fidelity		
7. Surety		
8. Boiler and Machinery		
9. Fire		
10. Extended Coverage		
11. Inland Marine		
12. Homeowners		
13. Commercial Multi-Peril		
14. Crop Hail		
15. Other <u>Workers Compensation</u>	<u>3,742,745</u>	<u>-0.8%</u>
<u>Line of Insurance</u>		

Does filing only apply to certain territory (territories) or certain classes?
If so, specify: _____

Brief description of filing. (If filing follows rates of an advisory organization, specify organization): With this filing we are adopting the rate revisions as set forth in NCCI Circular IL-2006-11.

- * Adjusted to reflect all prior rate changes.
** Change in Company's premium level which will result from application of new rates.



Utica Mutual Insurance Company
Name of Company

George T. Dodd, Vice President and Actuary
Official - Title